

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)



S/Jin

AF

		Application Number	10/512,113
		Filing Date	October 21, 2004
		First Named Inventor	Sunil Madhukar Bhangale, et al.
		Group Art Unit	1795
		Examiner Name	Daborah Chacko Davis
Total Number of Pages in this Submission (including this sheet)	13	Attorney Docket No.	3110.ARTH.PT

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Check for \$_____ <input type="checkbox"/> Credit card authorization for \$_____ <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ____ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input type="checkbox"/> Issue Fee Transmittal	<input type="checkbox"/> Maintenance Fee Transmittal <input type="checkbox"/> ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Other: _____	
		Remarks	

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Attorney for Applicant

Bretton L. Crockett, Registration No. 44,632
 MORRISS O'BRYANT COMPAGNI, P.C.
 734 East 200 South
 Salt Lake City, Utah 84102
 (801) 478-0071 telephone; (801) 478-0076 facsimile

Signature

Date

2/2/10

CERTIFICATE OF MAILING UNDER 37 CFR § 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, on the date indicated below, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or Printed Name **Bretton L. Crockett**

Signature

Date

2/2/10